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## PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docket Number:

09/881672

## CLAIMS AS FILED - PART I

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

\* If the difference in column 1 is less than zero, enter '0' in column 2

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

RATE	FEES
	\$.....
X \$.....	
X \$.....	
+\$.....	
	TOTAL

RATE	FEES
	\$.....
X \$.....	
X \$.....	
+\$.....	
	TOTAL

## CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))	21	Minus " 21	1
Independent (37 CFR 1.16(b))	2	Minus ... 3	1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

RATE	ADDI TIONAL FEE
X \$.....	
X \$.....	
+\$.....	
	TOTAL ADDL FEE

RATE	ADDI TIONAL FEE
X \$.....	
X \$.....	
+\$.....	
	TOTAL ADDL FEE

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))		Minus " 1	
Independent (37 CFR 1.16(b))		Minus ... 1	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDI TIONAL FEE
X \$.....	
X \$.....	
+\$.....	
	TOTAL ADDL FEE

RATE	ADDI TIONAL FEE
X \$.....	
X \$.....	
+\$.....	
	TOTAL ADDL FEE

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))		Minus " 1	
Independent (37 CFR 1.16(b))		Minus ... 1	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDI TIONAL FEE
X \$.....	
X \$.....	
+\$.....	
	TOTAL ADDL FEE

RATE	ADDI TIONAL FEE
X \$.....	
X \$.....	
+\$.....	
	TOTAL ADDL FEE

\* If the entry in column 1 is less than the entry in column 2, write '0' in column 3

\*\* If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter '20'

\*\*\* If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter '3'

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This form and its instructions are required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to be had by the USPTO to process an application. Confidentiality is guaranteed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments or the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

I/we need assistance in completing this form, call 1-800-PTO-8189 and select option 7.